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Bib Data Sheet

CONFIRMATION NO. 8030

|  |   |  |   |   |                                    |
|--|---|--|---|---|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/019,606   | <b>FILING DATE</b><br>05/01/2002<br><b>RULE</b>   | <b>CLASS</b><br>385                              | <b>GROUP ART UNIT</b><br>2874   | <b>ATTORNEY<br/>DOCKET NO.</b><br>S1011/20126 |                                    |
| <b>APPLICANTS</b><br>Andrew Hill, Nottingham, UNITED KINGDOM;  |   |  |   |   |                                    |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A 371 OF PCT/GB00/02553 03/07/2000  |   |  |   |   |                                    |
| <b>** FOREIGN APPLICATIONS *****</b><br>UNITED KINGDOM 9915420.5 07/01/1999<br>UNITED KINGDOM 9917015.1 07/20/1999   |   |  |   |   |                                    |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |   | <b>STATE OR<br/>COUNTRY</b><br>UNITED<br>KINGDOM | <b>SHEETS<br/>DRAWING</b><br>1  | <b>TOTAL<br/>CLAIMS</b><br>12                 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| Verified and Acknowledged<br>Examiner's Signature <i>BSB</i> Initials  |   |  |   |   |                                    |
| <b>ADDRESS</b><br>Caesar Rivise Bernstein<br>Cohen & Pokotilow<br>12th Floor Seven Penn Center<br>1635 Market Street<br>Philadelphia, PA 19103-2212  |   |  |   |   |                                    |
| <b>TITLE</b><br>Electrode  |   |  |   |   |                                    |
| <b>FILING FEE<br/>'RECEIVED'</b><br>1020   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                    |